

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.: 1684-109

Inventors: Ronald D. Shippert of 4975 S. Albion Street, Littleton, Colorado 80121

Express Mail Label No.: EV368035258 US

Title: "MEDICAL SUCTION DEVICE"

Box Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

17497 U.S. PTO
10/800329
031204

Enclosed for filing with the above-identified utility patent application, please find the following:

1. Applicant claims small entity status. See 37 CFR 1.27.
2. Specification (Total Pages of Text, including Abstract and Claims: 13)
3. Drawing(s) (35 USC 113) (Total Sheets: 2 FORMAL)
4. Oath or Declaration (Total Pages: 2 Signed)
5. Power of Attorney
6. Information Disclosure Statement (IDS/PTO-1449)
7. Copies of IDS Citations (Number of References: 5)
8. Return Postcard (MPEP 503) *(should be specifically itemized)*
9. A check in the amount of \$385.00 is enclosed.

FEE CALCULATION:

	(COL. 1) NO. FILED				(COL. 2*) NO. EXTRA		SMALL ENTITY			LARGE ENTITY	
							RATE	FEE		RATE	FEE
BASIC FEE:								\$385.00	OR		\$770.00
TOTAL CLAIMS:	19	-	20		0		X \$9 =	\$0.00	OR	X \$18 =	
INDEP. CLAIMS:	3	-	3		0		X \$43 =	\$0.00	OR	X \$86 =	
____ MULTIPLE DEPENDENT CLAIMS							+ \$145 =	\$0.00	OR	+ \$290 =	
*IF THE DIFFERENCE IN COL. 2 IS LESS THAN ZERO, ENTER "0" IN COL. 2.							TOTAL:	\$385.00			

OTHER INFORMATION:

1. The Commissioner is hereby authorized to debit any underpayments or credit any overpayment to Deposit Account No. 19-1970.
2. The Commissioner is hereby authorized to charge all required fees for extensions of time under §1.17 to Deposit Account No. 19-1970.
3. Correspondence Address:

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Respectfully submitted,
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Date: March 12, 2004